

# DECLARATION UNDER 35 USC §371(c)(4) FOR PCT APPLICATION FOR UNITED STATES PATENT

As a below named inventor, I hereby declare that:  
my residence, post office address and citizenship are as stated below under my name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought, namely the invention entitled: METHOD FOR THE DETECTION AND/OR IDENTIFICATION OF THE ORIGINAL ANIMAL SPECIES IN ANIMAL MATTER CONTAINED IN A SAMPLE

described and claimed in international application number PCT/FR03/00078 filed January 10, 2003.

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) filed by me or my legal representatives or assigns within one year prior to my international application are hereby claimed:

France 02/00265 filed on January 10, 2002

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to my international application, or (b) before the filing date of the above-named foreign priority application(s):

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1	Typewritten Full Name of Sole or First Inventor	<u>100</u>	<u>Claude</u>		<u>MABILAT</u>
			Given Name	Middle Initial	Family Name
2	Inventor's Signature:		<u>Claude</u>		<u>MABILAT</u>
3	Date of Signature:		<u>08</u>	<u>24</u>	<u>2004</u>
			Month	Day	Year
	Residence:	<u>Saint Germain Au Mont D'or</u>	<u>FRX</u>		<u>France</u>
		City	State or Province		Country
	Citizenship:	<u>France</u>			
	Post Office Address: (Insert complete mailing address, including country)	<u>5 rue du Manoir</u>			
		<u>69650 Saint Germain Au Mont D'or, France</u>			

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

(Discard this page in a sole inventor application)

1 **Typewritten Full Name of Joint Inventor** 200 Sabine DESVARENNE  
Given Name Middle Initial Family Name  
2 **Inventor's Signature:** Sabine Desvarenne  
3 **Date of Signature:** 08 14 2004  
Month Day Year  
Residence: Decines Charpieu FRX France  
City State or Province Country  
Citizenship: France  
Post Office Address: 170 rue Emile Zola  
(Insert complete mailing address, including country) 69150 Decines Charpieu, France

1 **Typewritten Full Name of Joint Inventor** 300 Odile BABOLA  
Given Name Middle Initial Family Name  
2 **Inventor's Signature:** odile BABOLA Babola  
3 **Date of Signature:** 08 24 2004  
Month Day Year  
Residence: Decines Charpieu FRX France  
City State or Province Country  
Citizenship: France  
Post Office Address: 25 rue Albert Thomas  
(Insert complete mailing address, including country) 69150 Decines Charpieu, France

1 **Typewritten Full Name of Joint Inventor** 400 Bruno LACROIX  
Given Name Middle Initial Family Name  
2 **Inventor's Signature:** Bruno LACROIX  
3 **Date of Signature:** 08 25 2004  
Month Day Year  
Residence: Saint Genis Laval FRX France  
City State or Province Country  
Citizenship: France  
Post Office Address: 33 chemin de Montlouis  
(Insert complete mailing address, including country) 69230 Saint Genis Laval, France

1 **Typewritten Full Name of Joint Inventor** 500 Natalia BELLO PIGEM  
Given Name Middle Initial Family Name  
2 **Inventor's Signature:** Natalia Bello Pigem  
3 **Date of Signature:** 08 10 2004  
Month Day Year  
Residence: Cambrils ESX Spain  
City State or Province Country  
Citizenship: Spain  
Post Office Address: Trav. Ancora 10, 3A  
(Insert complete mailing address, including country) 43850 Cambrils, Spain

**Note to Inventor:** Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney of the application to which it pertains.